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jc490 U.S. PRO
09/751781
12/30/00

Signature of Mailing Individual

9. ☐ Priority of the following application(s) is (are) claimed under 35 U.S.C. 119:

Serial No.	Date Filed	Country	Certified Copy of Priority Doc. Filed	
			USSN or PCT#	Date

11. ☐ An Extension of Time is filed concurrently herewith for the parent application.

12. ☐ Cancel claims prior to calculation of the filing fee.

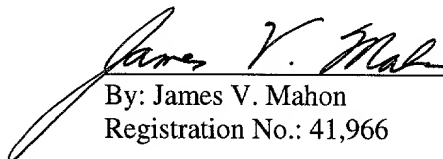
FILING FEE: calculated below (after accounting for any preliminary amendment or claims cancellations if noted above):

<input type="checkbox"/>	Total Claims	24	Total Claims Subject to Fees: 4	\$72.00
<input type="checkbox"/>	Independent Claims	4	Total Claims Subject to Fees: 1	\$80.00
<input type="checkbox"/>	Multiple Dependent Claims			\$
<input type="checkbox"/>	Basic Filing Fee			\$710.00
<input type="checkbox"/>	Extension Fees			\$
<input type="checkbox"/>	Less Small Entity Fee Reduction			\$
<input type="checkbox"/>	Assignment Recordal Fees			\$
	Total Fees			\$862.00

- ☒ The Commissioner is authorized to charge \$862.00 for filing this application as well as any additional fee or credit any overpayment due in connection with this communication to Deposit Account No. 50-0521. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Date: December 30, 2000


By: James V. Mahon
Registration No.: 41,966

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